

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>my</i>		2/5/99
O.I.P.E. CLASSIFIER		10	2-9-99
FORMALITY REVIEW	<i>025</i>	59227	2/17/99

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
1	06/01/99
2	06/01/99
3	06/01/99
4	06/01/99
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Claim	Date
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Claim	Date
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If more than 150 claims are entered on this sheet, staple additional sheet here

Best Available Copy